

# 2006-07 LEA Reporting Form for NCLB Title I, Part A and Homeless Education

California Department of Education

Consolidated Application

**Purpose:** To provide the number of homeless children and youth in the LEA and their primary nighttime residence.

Agency:

CD code:

**CDE Contact:** Leanne Wheeler - (916) 319-0383 - LWheeler@cde.ca.gov

**A. Homeless Liaison Contact**

Name

Title

Salutation

Phone

Fax

E-mail

**B. McKinney-Vento Homeless Education Funding**

☐ LEA received McKinney-Vento Homeless Education funding.

☐ LEA did not receive McKinney-Vento Homeless Education funding.

**C. Enrollment**

Grade Level	Pre-K	K	1	2	3	4	5	6	7	8	9	10	11	12	Total
Number of Homeless															

**D. Primary Nighttime Residency**

Type of Residency	Shelters	Doubled-up/Tripled-up	Unsheltered*	Hotels/Motels	Total
Number of Homeless					

\* Unsheltered (e.g., cars, parks, campgrounds, etc.)